

County: Lancaster

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
GOLDENCARE 403 W MEETING ST LANCASTER, SC 29720-2321 FAC.#:803-416-8000 BOWERS, SUSAN H PH#: 803-416-8000 Facility Email: GOLDENCARE2003@YAHOO.COM	Lancaster / Corporation 403 W MEETING ST LANCASTER, SC 29720-2321 GOLDENCARE INC ADC-0233 / 11/30/2014	60
Number of Participants:		60

Totals For Facility/License Type: Adult Day CareNumber of Activities/Facilities licensed: 1 Number Licensed Units: 60

County: Lancaster

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
SURGERY CENTER AT EDGEWATER 2536 LENGERS WAY FORT MILL, SC 29707-7126 FAC.#:803-802-9500 KIRBY, ELIZABETH PH#: 803-802-9500 Facility Email: ELIZABETH_KIRBHY@CHS.NET	Lancaster / Ltd. Liability 2536 LENGERS WAY FORT MILL, SC 29707-7126 CAROLINA SURGERY CENTER LLC ASF-0110 / 02/28/2015	5
Operating Rooms: 3 Procedure Rooms: 0 Endoscopy Rooms: 2		

Totals For Facility/License Type: Ambulatory SurgeryNumber of Activities/Facilities licensed: 1 Number Licensed Units: 5

County: Lancaster

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
HEATH SPRINGS RESIDENTIAL CARE CENTER 614 HART ST HEATH SPRINGS, SC 29058-8411 FAC.#:803-273-3227 BARNES, SUSAN PH#: 803-273-3227 Facility Email: HSRCC@COMPORIUM.NET	Lancaster / Corporation PO BOX 503 HEATH SPRINGS, SC 29058-0503 HEATH SPRINGS RESIDENTIAL CARE CENTER INC CRC-0761 / 04/30/2015	64
Alzheimer Care:No Max # Resident:0	Alzheimer Unit: No Max # Beds: 0	
Certifications:None		
MORNINGSIDE OF LANCASTER 1004 HARDIN ST LANCASTER, SC 29720-1609 FAC.#:803-285-8152 HODGIN, PAIGE L PH#: 803-980-4100 Facility Email: NBROOKS@5SQC.COM	Lancaster / Limited Liability Limited Partnership 1004 HARDIN ST LANCASTER, SC 29720-1609 MORNINGSIDE OF SOUTH CAROLINA LP CRC-1146 / 03/31/2015	65
Alzheimer Care:Yes Max # Resident:14	Alzheimer Unit: Yes Max # Beds: 14	
Certifications:None		

Totals For Facility/License Type: Community Residential Care FacilityNumber of Activities/Facilities licensed: 2 Number Licensed Units: 129

County: Lancaster

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>NANCY J MCCONNELL COMMUNITY RESIDENCE</b> 219 S PLANTATION RD LANCASTER, SC 29720-1847 FAC. #: 803-285-4368 ALTMAN, JAMES PH#: 803-286-5727 <b>Facility Email:</b> JALTMAN@CLDSN.ORG	Lancaster / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0075 / 05/31/2015</b>	8
<b>TOM MANGUM COMMUNITY RESIDENCE</b> 223 SOUTH PLANTATION RD LANCASTER, SC 29720 FAC. #: 803-285-4368 ALTMAN, JAMES PH#: 803-286-5771 <b>Facility Email:</b> JALTMAN@CLDSN.ORG	Lancaster / State PO BOX 4706, CO-DEPT OF DISABILITIES & SPECIAL NEEDS COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS <b>MR15-0074 / 05/31/2015</b>	8

Totals For Facility/License Type: Habilitation R15Number of Activities/Facilities licensed: 2      Number Licensed Units: 16

County: Lancaster

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
HOME CARE OF LANCASTER 901 W MEETING ST STE 201 LANCASTER, SC 29720-6209 FAC.#:803-286-1472 HELMS, RAYMOND E PH#: Facility Email: Not on File	Lancaster / Limited Liability 901 W MEETING ST STE 201 LANCASTER, SC 29720-6209 LANCASTER HOME CARE SERVICES LLC HHA-0050 / 12/31/2014	6
Counties Served: Chester, Chesterfield, Fairfield, Kershaw, Lancaster, York License Restrictions: Physical Therapy: Y Speech Therapy: N Occupational Therapy: Y Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N Other:		
RIGHT HOME HEALTH CONNECTION 501 W MEETING ST LANCASTER, SC 29720-2323 FAC.#:704-400-0332 TURNER, WILLIE PH#: Facility Email: KNGTURNER@NETSCAPE.NET	Lancaster / Corporation 16614 RUBY HILL PL CHARLOTTE, NC 28278-8422 RIGHT HOME HEALTH CONNECTION OF SC INC HHA-0236 / 02/28/2015	8
Counties Served: Charleston, Chester, Fairfield, Kershaw, Lancaster, Newberry, Richland, York License Restrictions: Physical Therapy: N Speech Therapy: N Occupational Therapy: N Med. Social Services: Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N Other: PSYCHOSOCIAL SERVICES		

Totals For Facility/License Type: Home HealthNumber of Activities/Facilities licensed: 2 Number Licensed Units: 14

County: Lancaster

Facility Type: Hospice Program

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
HOSPICE OF LANCASTER 901 W MEETING ST STE 201 LANCASTER, SC 29720-6210 FAC.#:803-286-1472 HELMS, RAYMOND E PH#: Facility Email: Not on File	Lancaster / Limited Liability 901 W MEETING ST STE 201 LANCASTER, SC 29720-6209 LANCASTER HOME CARE SERVICES LLC HPC-0039 / 12/31/2014	6
Counties Served: Chester, Chesterfield, Fairfield, Kershaw, Lancaster, York		

Totals For Facility/License Type: Hospice ProgramNumber of Activities/Facilities licensed: 1      Number Licensed Units: 6

County: Lancaster

Facility Type: Hospital or Institutional General Infirmary

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
<b>REBOUND BEHAVIORAL HEALTH</b> 134 E REBOUND RD LANCASTER, SC 29720-7712 FAC.#:803-513-6075 MELOSH, BRUCE PH#: 803-313-3705 <b>Facility Email:</b> BRUCE.MELOSH@ACADIAHEALTHCARE.COM	Lancaster / Limited Liability  REBOUND BEHAVIORAL HEALTH LLC <b>HTL-0912 / 10/31/2014</b>	42
<b>Licensed Beds: General: 0 Psychiatric: 24 Rehab: 0 Substance Abuse: 18</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 0</b>		
<b>Certifications:None</b>		
<b>SPRINGS MEMORIAL HOSPITAL</b> 800 W MEETING ST LANCASTER, SC 29720-2298 FAC.#:803-286-1481 DABNEY, JANICE PH#: 803-286-1481 <b>Facility Email:</b> JANICE_DABNEY@CHS.NET	Lancaster / Corporation 800 W MEETING ST LANCASTER, SC 29720-2298 LANCASTER HOSPITAL CORPORATION <b>HTL-0657 / 12/31/2014</b>	217
<b>Licensed Beds: General: 199 Psychiatric: 0 Rehab: 0 Substance Abuse: 18</b> <b>Other Beds : NICU: 0 Neonatal Special Care: 4</b>		
<b>Certifications:Abortions, Perinatal Level II, JCAHO Accredited</b>		

Totals For Facility/License Type: Hospital or Institutional General InfirmaryNumber of Activities/Facilities licensed: 2 Number Licensed Units: 259

County: Lancaster

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
LANCASTER CONVALESCENT CENTER 2044 PAGELAND HWY LANCASTER, SC 29720-7608 FAC.#:803-285-7907 SCHOLL, DEBORAH M PH#: 803-285-7907 Facility Email: DSCHOLL@CONPORIUM.NET	Lancaster / Corporation PO BOX 1749 LANCASTER, SC 29721-1749 LANCASTER CONVALESCENT CENTER INC NCF-0551 / 04/30/2015	142

Licensed Beds: Nursing Home: 142 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

TRANSITIONAL CARE UNIT AT SPRINGS MEMORIAL HOSPITAL 800 W MEETING ST LANCASTER, SC 29720-2298 FAC.#:803-286-1481 GOSNELL, LISA R PH#: 000-000-0000 Facility Email: LISA_CARLYLE@CHS.NET	Lancaster / Corporation 800 W MEETING ST LANCASTER, SC 29720-2298 LANCASTER HOSPITAL CORPORATION NCF-0723 / 04/30/2015	14
---	--	----

Licensed Beds: Nursing Home: 14 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

WHITE OAK MANOR LANCASTER 253 CRAIG MANOR RD LANCASTER, SC 29720-6531 FAC.#:803-286-1464 RIORDAN, MICHELE PH#: 803-283-1464 Facility Email: NCURTIS@WHITEOAKMANOR.COM	Lancaster / Corporation 253 CRAIG MANOR RD LANCASTER, SC 29720-6531 WHITE OAK MANOR LANCASTER INC NCF-0883 / 12/31/2014	132
---	---	-----

Licensed Beds: Nursing Home: 132 Institutional Nursing Home: 0

Alzheimer Care:No Max # Resident:0 Alzheimer Unit: No Max # Beds: 0

Certifications:None

Totals For Facility/License Type: Nursing HomeNumber of Activities/Facilities licensed: 3 Number Licensed Units: 288



County: Lancaster

Facility Type: PSAD Outpatient

Facility Name	County/Ownership Type	Licensed
Location Street	Mailing/Billing Address	Units
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
LANCASTER COUNTY COMMISSION ON ALCOHOL AND DRUG ABUSE	Lancaster / County	1
114 S MAIN ST	PO BOX 1627	
LANCASTER, SC 29720-2442 FAC.#:803-285-6911	LANCASTER, SC 29721-1627	
QUINN, WALTER J PH#: 803-285-6911	LANCASTER COUNTY COMMISSION ON ALCOHOL AND DRUG	
Facility Email: CSL@COMPORIUM.NET	ABUSE-BOARD	
	OTP-0032 / 09/30/2014	

Certifications:None

Totals For Facility/License Type: PSAD OutpatientNumber of Activities/Facilities licensed: 1 Number Licensed Units: 1

County: Lancaster

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Type Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Units
LANCASTER SC DIALYSIS 1100 W MEETING ST LANCASTER, SC 29720-2251 FAC.#:803-313-6600 VEREEN, SHARON WAYNETTE PH#: 000-000-0000 Facility Email: Not on File	Lancaster / Corporation 5200 VIRGINIA WAY STE 400, LICENSING AND CERTIFICATION BRENTWOOD, TN 37027-7569 DVA HEALTHCARE RENAL CARE INC ERD-0077 / 01/31/2015	29

Licensed Stations: Hemodialysis: 29 Peritoneal: 2

Totals For Facility/License Type: Renal DialysisNumber of Activities/Facilities licensed: 1 Number Licensed Units: 29

Number of Activities/Facilities licensed in county of <u>Lancaster</u>	# Lics: <u>16</u>
Number Licensed Units : <u>807</u>	

## Report Totals

Total Number of Activities/Facilities licensed 16 Total Number Licensed Units: 807